

RELEASE OF LIABILITY

(For a Minor - Under the Age of 19)

I,	, hereby certify that I am the parent and or legal	
the age of 19 years old, and I co Alabama State University. I und risks and dangers which are kno fully aware of the potential risk acknowledge that I, personally allowing the above-named minor	, D.O.B	gram being held on the campus of ated activities may involve certain to the above-named minor. I am mp and any related activities and assume the risk of such injury by
Knowing these facts and in consist my estate, my executors and according officers, directors, Board of Trust other claim, demand action, judge costs) arising out of or in connection.	rize the employees or agents of Alabama State University of the above-named minor conditions of the participation in this camp and nay redidentiators hereby release, discharge and indemnistees, representatives, and employees, from any and ment, loss, liability, cost and expenses (including with the above camp and any related activities of damage or loss to person or property that I may incur	child, whether an emergency or not lated activities, I myself, my heirs, lify Alabama State University, its all liability, for negligence or any nout limitations, attorney's fees and directly or indirectly, including, but
fully understand its contents. I a assumption of the risk of illness of	mineteen years of age and have carefully read this Relam aware that this Release contains an acknowledge of injury for the above-named minor child. I further a own free will. I agree that this agreement shall be	nent of my voluntary and knowing acknowledge that I have signed this
Signature	Date	
Emergency Contact:		
Home Phone:	Cell Number	